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## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09 517681

## Total Fee Calculation

				-		
	Fee Code	Total # Claims	Number Extra X	Fcc	Fcc ≃	Total
	Sm./Lg.			Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101	(	$\circ$		690.	
Total Claims >20	203/103	-20 -	XT x		378.	
Independent Claims >3	202/102	2 .3-	x		3	
Mult. Dep Claim Present	204/104					
Surcharge	205/105				B().	
English Tradulation	139					
TOTAL FEE CALCULA	TION					
Fees due upon filing th	ne application:					
Total Filing Fees Due	= 5	1198.0	N)			
Less Filing Fees Subm.	ined - \$	0	··			
Office of Initial Patent I	= \$ Examination	<u> 1198.</u> —	<u>(C)</u>			

							Application or D				Do	ocket Number			
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999							RD		(	79	2	1	7/0	>	
											<u> </u>				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							ì	SMALL ENTITY TYPE			, Ol	R	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED NUMBER EXTRA					RAT	E	FEE		ſ	RATE	FEE				
BASIC FEE							345.0	0 0	R		690.00				
TOTAL CLAIMS			4]	minus 2	20=	. 2			X\$ 9	)=		OI	R	X\$18=	308
INDEPENDENT CLAIMS 2 minus 3 = *						X39	=			R.	X78=	1			
MULTIPLE DEPENDENT CLAIM PRESENT								+130	)=		0	Ì	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	AL			L	TOTAL	1068		
CLAIMS AS AMENDED - PART II									,				OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMA	LL	ENTITY	<b>/</b> _OF	٦,	SMALL		
AMENDMENT A		REMA AF	AIMS AINING TER DMENT	*** * ** ****	Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	Έ	ADDI TIONA FEE	۱L		RATE	ADDI- TIONAL FEE
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MENT B		REM.	AINING TER IDMENT		Р	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	Έ	ADDI TIONA FEE	AL		RATE	ADDI- TIONAL FEE
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(Column 1) (Column 2) (Column 3)											<u>.</u>				
ENT C		REM.	AIMS AINING TER IDMENT		Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	Ε	ADDI TIONA FEE	\L		RATE	ADDI- TIONAL FEE
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Ľ	FIRST PRESE	NTATIC	ON OF MI	JLTIPLE DE	PEN	DENT CLAIM	1	]				7			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+130				R	+260=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							."	TO ADDIT. I	TAL FEE	L		R	TOTAL ADDIT. FEE		
	The "Highest Nun							er fo	und in th	ne an	propriate	box in	co	lumn 1	

FORM PTO-875 (Rev. 12/99)